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APPLICANTS

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\*\* CONTINUING DATA ..... *none* ..... *J.L.*

\*\* FOREIGN APPLICATIONS ..... *no* ..... *J.L.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 11	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4
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35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after

Verified and Acknowledged  
 Examiner's Signature: *Blaine Key* Initials: \_\_\_\_\_

ADDRESS

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TITLE

Virtual invisible keyboard

FILING FEE  RECEIVED 1140	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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